

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-975)

Serial No. **09/728,171**
FILING DATE

4-20-04 8-4-04		CLAIMS					
BEFORE		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
NO.	DER.	NO.	DER.	NO.	DER.	NO.	DER.
1	/	/	/	/	/		
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50	/	/	/	/	/		
TOTAL NO.	3	0	4	0	4	0	
TOTAL DER.	14	0	23	0	22	0	
TOTAL CLAS.	17		27		26		

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TOTAL NO.		0		0		0	
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* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS